Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 27/02/2020 16:53

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	27/02/2020 15:29
Date Of Accident	24/02/2020 15:40
Exact Location Of Accident	OSCP BLK 418 TURN LEFT TO WOODLANDS STREET 41
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMS1964H
Insured/Policyholder	
Name Of Registered Owner	TAY BOON KIM
NRIC No	SXXXX872B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93867796
Alternative Phone No	Others-93867796
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	CAMRY 2.5
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
lf No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	2070016229
Driver	
Name of Driver	TAY BOON KIM
NRIC No	SXXXX872B
Date Of Birth	12/01/1967
Occupation	INDOOR
Date Of Driving Pass	14/07/1987

32 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93867796

Fax Number

Contact Number OTHERS-93867796

EMail Address NOEMAIL

Address BLK 416 WOODLANDS STREET 41

#12-149

Postcode 730416
Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

_

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

NO

NO

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number PC6310K

Vehicle Make/Model/Colour TOYOTA HIACE

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Z

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo

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	B/A/	
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cleaned and I moved solution is (QC6210K) but show proby did a No one were injuri	ut accept our st	er.

Policyholder's Signature Date & Time: 27 FEB 2020

Driver's Signature (If driver is not the policyholder) Date & Time:

GIARM/ SketchPlanForm_V3

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: Poh Kwee Choo



COVER NOTE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder,

Name of Policyholder : TAY BOON KIM

Period of Insurance : 12 Feb 2020 to 11 Feb 2021 Cover Note No. : 2070016229

Engine No.

: A25A0487048 : MR2B63HKX04003505 Endorsement No. : 12 Feb 2020 Chasis No. Issued Date

ABOUT THE COVER

Make/Model : TOYOTA CAMRY 2.5

Engine Capacity/Tonnage : 2,487.00 CC Sum Insured : Market Value First Year of Registration : 2020 Insuring with COE/PARF : Yes Off Peak Car : No Driver Restriction : NA

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnity the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Vehicle No.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hite or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Companisation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$1000 Theft - \$0 Flood Cover - \$1000

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable) TAY BOON KIM - \$1000 (Own Damage), \$1000 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Toyota Bodycare Centre (For accident repair & accident reporting). Add: 2 Pandan Crescent Singapore 128452 Tel: 6631 1186

2. Toyota Bodycare Centre (For accident repair & accident reporting). Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from ITunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.

If you have been the cover note is issued in accordance with the provisions of the Motor Vehibles (Third Party Risks and Compensation) Act [Cap. 188]. Part IV of the Road Transport Act, 1987 (Malasiya), and Motor Vehibles (Third Party Risks Rules, 1885). Part IV of the Road Transport Act, 1987 (Malasiya), and Motor Vehibles (Third Party Risks Rules, 1885). Part IV of the Road Transport Act, 1987 (Malasiya), and Motor Vehibles (Third Party Risks) Rules, 1886). Per Corporate Profices, this Cover Note is valid for 90 days from the commencement date of this period of insurance.

0504867206

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

INCHCAPE AUTO TOYOTA - BSTL007 33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Pel I I Christina Ho.

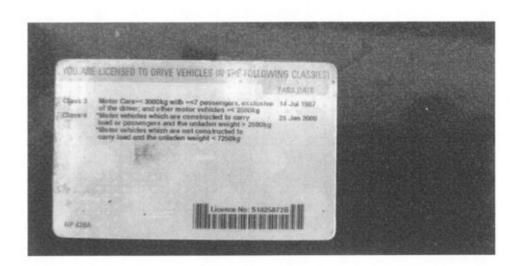
78 Shonton Way #09-16 AIG Building S079120 | T:+65 6419 3000 | www.aig.sg

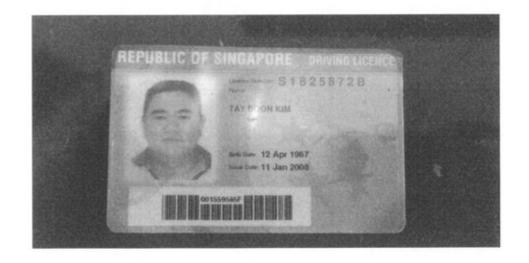
AIG Asia Pacific Insurance Pte. Ltd.





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Accident Photo









Accident Photo



CHASSIS NUMBER

